

Purpose

The purpose of this policy is to provide guidance to faculty members of FRPMC on handling possible academic conflicts of interest that may arise as a result of their roles in various academic responsibilities.

Scope

The scope of this policy:

- a) This procedure applies to members of all statutory bodies and non-statutory bodies/Committee.
- b) This procedure also applies to all FRPMC faculty & staff including full-time and part-time.
- c) The content of the procedure cannot cover every potential conflict and must be interpreted in the light of the particular circumstances of each case.

Policy Statement

This policy aims to:

- a) Define what is meant by conflict of interest in academic context.
- b) Identify situations where a conflict of interest may arise.
- c) Reduce the possibility of a conflict of interest arising.
- d) Outline the responsibilities and describe the procedures that should be followed and how to handle potential conflicts of interest.

Definitions

This policy aims to:

Academics: All the faculty members working for FRPMC in any capacity.

Staff: All the members of FRPMC who are working in administrative capacity.

HR: Human resource department of FRPMC.

Statutory Bodies: All the bodies listed in the FRPMC code book.

Non - Statutory Bodies: All the committee (permanent/ad-hoc) which are not listed in the statutes and which are formulated at FRPMC for various assignments/tasks.

Linked/ Reference Documents

FRPMC Statutes

Responsibilities

The policy ownership lies with the Principal Office.

Following is the responsibility division of this policy.

- a) All academic staff have a responsibility to be aware of the potential for a Conflict of Interest.

- b) All relevant staff are responsible for disclosing any activity that might give rise to a potential conflict of interest to the Head of Department. If the staff member is unsure whether a conflict of interest might arise, they should discuss this with Head of department.
- c) In case of any relative or family member of FRPMC faculty and staff (assessors, invigilators, reviewers and administrators of assessment-related materials) is accepted, a declaration of interest form must be completed by the concerned faculty.
- d) Head of Institution is responsible for documenting the issue carefully.

Policy Implementation Procedure

a) What is a Conflict of Interest?

A conflict of interest is a situation in which an individual has competing interests or loyalties. In the case of an individual, the conflict of interest could compromise or appear to compromise their decisions if it is not properly managed.

b) Examples of conflict of interest

Conflicts of interest can arise in a variety of circumstances, for example:

- An individual whose personal interests' conflict with his professional position.
- An individual who is connected to the development, delivery or award of qualifications has interests in any other activity which have the potential to lead that person to act contrary to his interests in that development, delivery or award in accordance with the awarding organizations regulatory requirements.
- A member of staff is asked to assess, invigilate or internally verify the work of institute enrolled student who is a family member, other relative, or a close friend.
- An individual scheduled to review the work of friend or relatives at FRPMC.
- Using the Institute's intellectual property to assist a like-business or for purposes relating to a private interest.
- Staff member accepts an undue gift from a student that could affect his decisions in assessments.

Note: This list of Example is not exhaustive.

c) Management of Conflict of Interest

Individual Responsibility

1. All staff members should be aware of conflict-of-interest policy and should inform the Head of Institution if they think there is any potential for a conflict of interest. This may include the

recruitment decisions, admissions, examinations mechanism, committee and/or purchase for university. The list is not exhaustive and may include other areas as deemed necessary.

2. All the members of statutory and non-statutory bodies should report the possible conflict of interest to the chair which may arise during any agenda item or during any proceedings of the body for which they have membership.
3. The concerned official will declare the possible conflict of interest in writing.
4. The received conflict(s) of interest declarations will be reviewed by the Head of Institution/department and will be recorded formally.
5. The Head of Institution will assess the case, evaluate the impact (if any) and ensure that the conflict of interest is managed effectively. Examples of actions that could be taken are:
6. The individual not taking part in discussions or decisions related to certain matters.
7. Referring certain matters such as assessment, verification for decision to others who have no conflict of interest.
8. Agreeing not to be involved in a particular project

Note: The above examples of actions list are not exhaustive.

9. The Head of Institution must inform the involved individual of the taken action.
10. In the event the identified conflict of interest cannot be managed by the Head of Institution, the conflict of interest shall be escalated to the competent authority. The competent authority shall investigate and identify the steps to be taken to manage the conflict of interest effectively.
11. All Conflict-of-Interest documents should be retained/maintained with the concerned departments. A sample of such forms would be shared with Quality Enhancement Cell (QEC), where such documents will be retained for audit purposes.

Department Responsibility

1. Examination department would collect the conflict-of-interest declaration from every examiner/invigilator. In case a case is reported, above mechanism would be observed.
2. HR department would collect the conflict-of-interest declaration from members of selection board before interviews. The same will also be collected from promotion committee meetings. In case a case is reported, above mechanism would be observed.

Revision/ Modification History & frequency

1. The policy will be reviewed every three years. However, the owner/custodian of the policy may request for a revision based on emerging needs and with the approval from competent authority.
2. A formal approval will be required if a policy is revised more than 25%. Principal, FRPMC would determine the percentage of revision in consultation with the custodian of policy.